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PTO/SB/82 (04-05)

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REVOCATION OF POWER OF ATTORNEY WITH NEW POWER OF ATTORNEY AND CHANGE OF CORRESPONDENCE ADDRESS	Application Number	10791513
	Filing Date	March 1, 2004
	First Named Inventor	William E. Fietes
	Art Unit	1646
	Examiner Name	C. M. Kaufman
	Attorney Docket Number	ASZD-P02-311

I hereby revoke all previous powers of attorney given in the above-identified application.

☐ A Power of Attorney is submitted herewith.
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☒ I hereby appoint the practitioner associated with the Customer Number: 44992

☒ Please change the correspondence address for the above-identified application to:
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☐ Applicant/Inventor.

☒ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/88)

SIGNATURE of Applicant or Assignee of Record

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NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see 1 above.

☒ Total of 1 forms are submitted.

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Dated: 7-13-06 Signature: [Signature] [Signature]

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